PTO/SB/21 (09-04)

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

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Application Number	09/757,555
Filing Date	January 9, 2001
First Named Inventor	Levon M. KHACHIGIAN
Art Unit	1633
Examiner Name	J. Epps-Ford
Attorney Docket Number	529282000220

E	ENCLOSURES (Check all that apply)				
x Fee Transmittal Form (1 page in duplicate)	Drawing(s)	After Allowance Communication to TC			
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences			
Amendment/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final	Petition to Convert to a Provisional Application	Proprietary Information			
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter			
Extension of Time Request	Terminal Disclaimer	X Other Enclosure(s) (please Identify below):			
Express Abandonment Request	Request for Refund	Form PTO/SB/08a/b (2 pages in duplicate)			
x Information Disclosure Statement (3 pages)	CD, Number of CD(s)	2. References (28) 3. Return Receipt Postcard			
Certified Copy of Priority Document(s)	Landscape Table on CD				
Reply to Missing Parts/ Incomplete Application	Remarks				
Reply to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNAT	URE OF APPLICANT, ATTORNEY, O	R AGENT			
Firm Name MORRISON & FOE	226)				
Signature Thankan	Lake				
Printed name Shantanu Basu					
October 14, 2005	Reg. No.	43,318			

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Dated: October 14, 2005

PTO/SB/17 (12-04v2)
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X	Effective on 12/08/2004. Complete if Known								
Fees pursuant to		riations Act, 2005 (H.R. 4818).	Application Nun	Application Number 09/757,5			/757,555		
I FEE	ETRANS	MITTAL	Filing Date				January 9, 2001		
	For FY 20		First Named Inv	entor l	Levon M. KHA	CHIGIAN			
	1011120	Examiner Name		J. Epps-Ford					
Applican	t claims small entity stat	Art Unit		1633					
TOTAL AMOU	NT OF PAYMENT	(\$) 180.00	Attorney Docket	No.	529282000220)			
METHOD OF	PAYMENT (check	all that apply)							
Check	Credit Card	Money Order N	one Other (please ident	ify):				
X Deposit Ac	count Deposit Account I	Number: 03-1952 Deposit A	ccount Name:	Mor	rison & Foerst	er LLP			
For the	above-identified depo	sit account, the Director	is hereby authorize	ed to: (chec	ck all that apply)				
X CI	harge fee(s) indicated	below	Charg	e fee(s) ind	licated below, ex	ccept for the	e filing fee		
	harge any additional f e(s) under 37 CFR 1	ee(s) or underpayment o .16 and 1.17	f x Credit	any overpa	ayments				
FEE CALCUI	_ATION								
1. BASIC FILIN	G, SEARCH, AND E	XAMINATION FEES							
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Application Ty	ype Fee (\$	Small Entity) Fee (\$) Fee	Small Entity Specification Spe	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)		
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Design	200	100 100	50	130	65				
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Provisional	200	100	0	0	0				
2. EXCESS CLA							mall Entity		
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
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4. OTHER FEE	•		_ (round up to a who	oie number)	× :	Fees F	Paid (\$)		
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SUBMITTED BY									
Signature	Thanton	11/04	Registration No.	43,318	Telephone	(650) 813	-5995		
Name (Print/Type)	Shantanu Basu	NULY	(Attorney/Agent)	,	Date	October 14			
	Chanana basa					OCIODEI I	·, 2003		

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Signature:

Dated: October 14, 2005

corqua Malo Georgina Matos)

Patent Docket No. 529282000220 Client Reference No. 1311-7567

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

re Patent Application of: Levon M. KHACHIGIAN

Serial No.: 09/757,555

Filing Date: January 9, 2001

INHIBITION OF PROLIFERATION OF

CELLS

Examiner: J. Epps-Ford

Group Art Unit: 1633

SUPPLEMENTAL INFORMATION DISCLOSURE **STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98**

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicant submits for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a/b. Copies of the documents are also submitted herewith. The Examiner is requested to make these documents of record.

This Supplemental Information Disclosure Statement is submitted: With the application; accordingly, no fee or separate requirements are required. Before the mailing of a first Office Action after the filing of a Request for Continued Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided. 00000025 031952 09757555

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	Withi	n three months of the application filing date or before mailing of a first Office Action
	on the	merits; accordingly, no fee or separate requirements are required. However, if
	applic	able, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
\boxtimes	After	receipt of a first Office Action on the merits but before mailing of a final Office Action
	or No	tice of Allowance.
		A fee is required. A check in the amount of is enclosed.
	\boxtimes	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to
		this submission in duplicate.
		A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is
		believed to be due.
	After	mailing of a final Office Action or Notice of Allowance, but before payment of the
	issue	fee.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the
		amount of is enclosed.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal
		form (PTO/SB/17 is attached to this submission in duplicate.)

Applicant would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicant petitions for any required relief including

extensions of time and authorizes the Commissioner to charge the cost of such petition and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing 529282000220.

Dated: October 14, 2005

Respectfully submitted,

Shantanu Basu

Registration No.: 43,318

MORRISON & FOERSTER LLP

755 Page Mill Road

Palo Alto, California 94304-1018

(650) 813-5995



		_		Complete if Known		
Sui	Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Application Number	09/757,555		
II	NFORMATIC	ON DI	SCLOSURE	Filing Date	January 9, 2001	
				First Named Inventor	Levon M. KHACHIGIAN	
	STATEMENT BY APPLICAN			Art Unit	1633	
	(Use as many she ets as necessary)		necess ary)	Examiner Name	J. Epps-Ford	
Sheet	1	of	2	Attorney Docket Number	529282000220	

	U.S. PATENT DOCUMENTS				
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

	FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T⁵

*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. \(^1\) Applicant's unique citation designation number (optional). \(^2\) See Kinds Codes of USPTO Patient Documents at www.uspto.gov or MPEP 901.04. \(^3\) Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). \(^4\) For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patient document. \(^5\) Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. \(^6\) Applicant is to place a check mark here if English language Translation is attached.

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
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Examiner	Date
Signature	Considered

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Suc	ostitute for form 1449/FTO			Application Number	09/757,555	
IN	NFORMATION	l Di	SCLOSURE	Filing Date	January 9, 2001	
INFORMATION DISCLOSURE STATEMENT BY APPLICAN		First Named Inventor	Levon M. KHACHIGIAN			
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	(Use as many she	ets as	necess ary)	Examiner Name	J. Epps-Ford	
Sheet	2	of	2	Attorney Docket Number	529282000220	

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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Examiner	Date	
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